Annual Report 1949

NEW ENGLAND DEACONESS HOSPITAL

Deaconess General • Palmer Memorial • George F. Baker Clinic

THE NEW ENGLAND

Deaconess Hospital

. . . "it is unsectarian in its broadest sense, and numbers among its patients members of every religious faith, yet the dominant note is that of a Christian home" . . .

Boston TRANSCRIPT, 1898

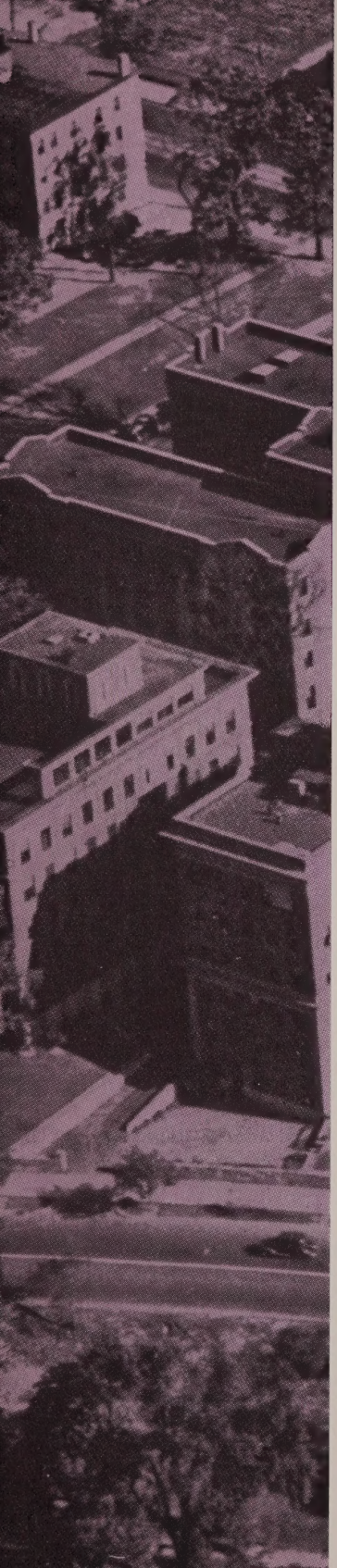
Sixteen Deaconess Road, Boston 15, Massachusetts

Foreword

In this, the sixth decade of its existence, the New England Deaconess Hospital has become famous for its special skills in the treatment of cancer, diabetes, thyroid, brain, chest and general surgery.

Proud as we are of the skills and reputations of our staff of specialists, we hasten to emphasize the fact that the New England Deaconess has remained a general hospital . . . in fact, a better general hospital because of the standards set by its specialties.

This annual report to the Board of Trustees, to the Members of the Corporation, and to the public, endeavors to present a clear and comprehensive picture of the multiple functions of the New England Deaconess Hospital, as represented by each of the activities encompassed in its administration during the year of 1949.



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Officers of the Hospital

President

Ernest G. Howes
321 Summer Street
Boston, Massachusetts

Vice-President

Howard D. Brewer
12 East Worcester Street
Worcester, Massachusetts

Treasurer

Francis W. Capper
Boston Safe Deposit & Trust Co.
Boston, Massachusetts

Clerk

Vincent P. Clarke
27 State Street
Boston, Massachusetts

Executive Committee

Stanley O. MacMullen, Chairman
John Barnard
*Francis W. Capper
*Vincent P. Clarke
John A. Dunn
Carl S. Ell
*Ernest G. Howes
Henry S. Rogerson
Howard W. Selby
William B. Snow, Jr.
Howard F. Root, M.D., Staff Representative

Finance Committee

*Francis W. Capper
Paul F. Clark
*Ernest G. Howes
Elliott P. Joslin, M.D.
Frank H. Lahey, M.D.
Howard W. Selby
William B. Snow, Jr.
Francis R. Carnegie Steele
Ralph E. Thompson

Investment Committee

John Barnard
*Francis W. Capper
*Ernest G. Howes
Stanley O. MacMullen
Henry S. Rogerson

School of Nursing Committee

Alexander Marble, M.D., Chairman
Mrs. N. Dean Allen
Robert E. Brownlee, M.D.
*John W. Cass, Jr., M.D.
*Warren F. Cook
Miss Alice C. MacKinnon
Mrs. Eugene H. Mather
Miss Olive L. Nelson
*Miss Margaret M. Shrader
J. Wendell Yeo, Ph.D.

*Ex officio.

Board of Trustees

Term Expiring 1951

Mrs. Roscoe A. Carter
Elliott P. Joslin, M. D.
Frank H. Lahey, M. D.
William O. LeFavre
John Wesley Lord
Matthew P. Scullin
William B. Snow, Jr.
Francis R. Carnegie Steele

Term Expiring 1952

Francis W. Capper
Mrs. Alexander G. Grant
Miles C. Higgins
Laurence H. H. Johnson
Mrs. Eugene H. Mather
Charles O. Pengra
Leland Powers
Glenwood J. Sherrard
Mrs. Sheldon E. Wardwell
Edward E. Whiting

Term Expiring 1953

Mrs. Charles F. Adams
Carl S. Ell
Sam T. Emery
Ernest G. Howes
J. Franklin McElwain
Robert H. Montgomery
Sinclair Weeks
Mrs. E. N. Wrightington
Roy A. Young

Term Expiring 1954

Frank G. Allen
Alfred H. Avery
Emory S. Bucke
Horace A. Carter
Paul F. Clark
John A. Dunn
Roger I. Lee
Stanley O. MacMullen
Vincent P. Clarke

Term Expiring 1955

John Barnard
Howard D. Brewer
Miss Mabel T. Eager
Earl Johnson
Henry S. Rogerson
Howard W. Selby
J. P. Spang, Jr.
Donald B. Stanbro
Ralph E. Thompson
Mrs. William L. Young

Members of the Corporation

Mrs. Charles F. Adams
Herbert F. Aldrich
Charles T. Allen
Frank G. Allen
Willard Arnold
Alfred H. Avery
R. K. Bachelder
John Barnard
Maurice E. Barrett
William H. Bath
Lester L. Boobar
Edwin A. Brewer
Howard D. Brewer
F. Gorham Brigham, M.D.
Edgar S. Brightman
William G. Brooks
Emory S. Bucke
Theodore L. Buell
Maurice L. Bullock
T. R. Burns
Frank W. Buxton
Horace T. Cahill
Arthur A. Callaghan
Russell R. Cameron
Duncan R. Campbell
Francis W. Capper
Horace A. Carter
Mrs. Roscoe A. Carter
William H. Carter
Lawrence W. Case
Richard B. Cattell, M.D.
Paul F. Clark
Wilson D. Clark, Jr.
Vincent P. Clarke
James V. Claypool
Karl T. Compton
Howard W. Cowee
Ray H. Cowen
Guy W. Cox
Louis A. Cox
Orville E. Crain
G. A. Dahlquist
E. Merrill Darling
George R. S. Denton
Albert C. Dieffenbach
George P. Dike
Robert G. Dodge
John Ainsworth Dunn
Miss Mabel T. Eager
Carl S. Ell
Eben H. Ellison, Jr.
Sam T. Emery
Laurence W. C. Emig
George A. Fallon
Mrs. William M. Flanders
Allan Forbes
Harry P. Forte
W. Jesse Fowler
Fred E. Fox
Carl W. Garland
J. Arthur Gibson
Hamilton M. Gifford
C. Homer Ginns
Francis J. Good
Mrs. John L. Grandin
Mrs. Alexander G. Grant
William M. Gunter
Leonard C. Harris
Harley Daniel Hawver
J. Willard Hayden
Bernard Henninger
Miles C. Higgins
H. B. Hill
Charles C. P. Hiller
Ernest G. Howes
Richard S. Humphrey
A. Alonzo Huse
Charles W. Jeffras
Earl Johnson
Gordon Johnson
Laurence H. H. Johnson
Mrs. Harry L. Jones
Ralph P. Jones
Elliott P. Joslin, M.D.
Richard Kellogg
William T. King
J. Franklin Knotts
Theodore C. Koch
Frank H. Lahey, M.D.
Roger I. Lee
William O. LeFavre
Herbert E. Locke
John Wesley Lord
Stanley O. MacMullen
Alexander Marble, M.D.
Daniel L. Marsh
George A. Martin
Mrs. Eugene H. Mather
J. Franklin McElwain
Frank M. McGowan
Leland S. McKittrick, M.D.
Edward F. Miller
Philip I. Milliken
Edward F. Miner
Robert H. Montgomery
William H. Nye
*Charles S. Otto
Lester C. Peabody
Charles O. Pengra
Joseph E. Perry
Robert M. Pierce
Leland Powers
William P. Pritchard
John B. Reid
Henry S. Rogerson
Howard F. Root, M.D.
Charles F. Rowley
C. Adrian Sawyer, Jr.
George G. Scrivner
Matthew P. Scullin
Howard W. Selby
G. Vaughn Shedd
Joseph M. Shepler
Glenwood J. Sherrard
William B. Snow, Jr.
Joseph P. Spang, Jr.
E. Ray Speare
Donald B. Stanbro
Louis S. Staples
F. R. Carnegie Steele
Albert Stone, Jr.
Earl E. Story
Archiver J. Strait
LeRoy W. Stringfellow
Francis D. Taylor
Ralph E. Thompson
Harold G. Tobey
Miss Clara Trowbridge
Irving J. Walker, M.D.
Mrs. Sheldon E. Wardwell
Shields Warren, M.D.
Parker Webb
Sinclair Weeks
C. D. Wentworth
Ross Whistler
Edward E. Whiting
Ben Ames Williams
Lawson Williams
Elwin L. Wilson
John C. Wingett
Mrs. E. N. Wrightington
Roy A. Young
Mrs. William LeRoy Young

*Deceased

Administration of the Deaconess Hospital

Warren F. Cook
Executive Director

Robert D. Lowry
Assistant Director

Departmental

Miss Ellen Adams
Personnel Director

Miss Florence Brown
Supervisor of Surgery

H. F. Byrne
Public Relations Director

Joseph K. Chamberlin
Purchasing Agent and Chief Pharmacist

Walter C. Emery
Executive Housekeeper and Laundry Manager

Mrs. Gertrude S. Jameson
Social Service Director

Dr. Joseph H. Marks
Roentgenologist

Donald L. Sabine
Superintendent of Maintenance

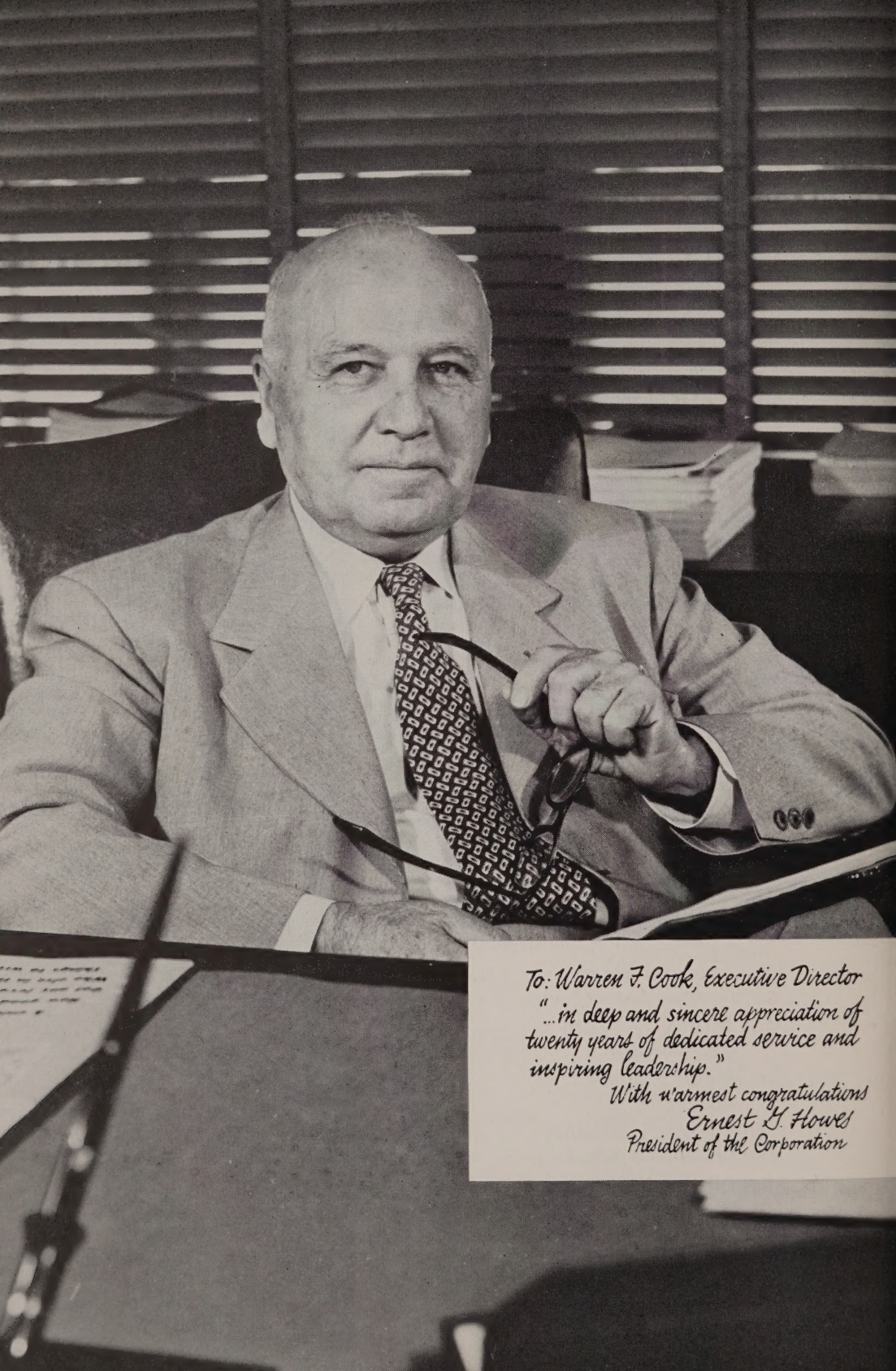
Miss Margaret Shrader
Superintendent of Nurses

Miss Bertina Terkelsen
Office Manager

Dr. Shields Warren
Pathologist

Miss Pamela A. Whitney
Director of Volunteer Service

Miss Effie May Winger
Dietitian in Chief



To: Warren F. Cook, Executive Director

"...in deep and sincere appreciation of twenty years of dedicated service and inspiring leadership."

With warmest congratulations

Ernest G. Howes

President of the Corporation

REPORT OF
Executive Director

The cost of hospital operation has increased greatly in the last several years. As a result, one of America's great hospitals in Boston has used practically all of its free endowment funds. Its current deficit is too large to be paid by the Community Fund, which may well mean that this great hospital will have to withdraw from the Community Fund and put on its own fund-raising campaign to save its life. A few more such experiences and central financing, with its many advantages, may fail, not only here in Boston, which has led the nation in this endeavor, but in all America.

Like central financing, Blue Cross is another effort to save the voluntary hospitals of America from federal control. Blue Cross is at the present time covering almost 50,000,000 members in America, but is still very much on trial. Last year the Deaconess Hospital lost almost $50,000 on Blue Cross patients and the voluntary hospitals of Massachusetts lost more than $1,000,000. Voluntary hospitals cannot be expected to subsidize Blue Cross patients. We must work with this organization rather than against it, however, if we expect to keep medicine and hospitals free of Federal control. We expect things to be very much improved by the time this report is published.

For compensation cases this State now pays $10 per day and this inadequate payment has been raised from $6 only in the last two years as a result of a state-wide public relations program. Public education through public relations must be decidedly stepped up if we hope to bring payments up to cost. The Massachusetts Hospital Association this year is spending about $15,000 on a Public Relations Program in this State. It should be spending $50,000 or $60,000 and would if it had it. Hospitals face an unfriendly legislature unable to see why hospital costs have risen so high. The big difficulty is that charges and costs are continually being confused.

When I came to Boston 20 years ago, hospital rates had no relation whatsoever to cost. They were set at what was thought the public could and would pay at that time. Ward rates were $21 per week, while the cost at that time was approximately twice the rates charged. Today, we find that the actual cost has increased about 100 per cent which is in line with other necessities. But people continue to compare only the rates, which have increased from $3 and $4 to $10 and $12 per day for ward care. If the difference between costs and rates were clearly analyzed and spelled out so that all the people could understand, I believe they would support us. This, however, takes money — a great deal of money.

Our own hospital is not in such dire straits as the average, because our patients come from a national area, rather than locally.

Patients are sent here to a special doctor. They know that neither the doctor nor the hospital has any local or community obligation to them, which makes a great difference between our situation and that of the community hospital, where practically all patients come from the immediate neighborhood. Of course, we do free work amounting to something over $200,000 annually. But we also see our own picture changing. In 1949, we had 21,000 *less* full-paid patient days than in 1948, while free and part-free days increased by 18,000. We had 2,500 less patient days this past year than in 1948, but we served a larger number of patients. The reason for this is that the average patient's stay has been shortened by about one and a half days.

This situation has increased the work of most departments as much as 10 to 15 per cent, and it has increased our costs proportionately. But it has also increased our revenue. Bequests, in 1949, amounted to $105,636.11, and we had unusually good returns from our endowments and from the Sargent Fund. It is interesting to note that our Administrative and General Expenses, including publicity, were $10,000 less in 1949 than in 1948; that our Household and Property Expenses were $25,000 less than in 1948; that fuel oil was $12,000 less, and food was $25,000 less; and that we spent $135,000 more for the professional care of patients, which is a fine trend. Needed equipment purchased during 1949 amounted to $47,000. This included a new paging system which has already greatly decreased the load on our switchboard and nurse supervisors.

Three pieces of property were purchased at a cost of $63,000. On two of these properties the old houses were torn down and a new parking area constructed at an additional cost of $8,000. The third house was refurnished as a home for Operating Room personnel at a cost of $4,000, which will save us approximately $100 a month so long as the property is used. An additional floor of furniture was bought for the Nurses' Home and replacement of our outmoded bedside tables was begun.

Work on final plans for the new buildings is progressing well. We expect to see ground broken in the Spring. Federal money amounting to over $400,000 for the new building and $485,000 for the Cancer Research Institute is promised.

The report of the Nursing Department is heartening indeed, showing an increase of 17 per cent in the time spent with the individual patient. Such a fine record is a result of improved supervision, new equipment and more adequate facilities. Both graduate nurse and auxiliary worker personnel showed a decided increase in numbers and in stabilization, and for the first time a record of the work of Special Duty Nurses was kept by means of efficiency reports.

In the Nursing School, enrollment totaled 225, the largest in our history, while withdrawals dropped to 17 per cent, as compared to 28 per cent the year before. Definite progress was made in the coordination of classroom instruction with practical training. Vacations during training were extended to eleven weeks, and the home school schedule was reduced to 44 hours per week. Medical attention and organized exercise for the students were placed under the direction of the new Health Coordinator.

That the Pharmacy Department had a busy year is indicated by a total of 2379 purchase orders for about 18,000 items, costing $159,848.85. Some 6000 items valued at $50,000.00 were stocked, reflecting a stock turnover of three and one-fifth times a year. This compares favorably with similar commercial establishments. Requisitions for special medications for patients in the hospital totaled 107,674, while prescriptions outside the hospital numbered nearly 18,000. Main orders totaling 8244 were filled for customers all over the country, and cash sales in the Apothecary amounted to $51,774.79.

The 1949 report of the Personnel Department is high-lighted by the fact that fewer jobs were open throughout the hospital, because the turnover rate continued to drop to 2.8 per cent a month. The requirement of pre-employment physical examinations, with a wider selection and continued emphasis on well-qualified and well-recommended employees, showed definite results in better staffing of the hospital.

The Surgery Department's program under one supervision is proving effective. Nursing procedures in the operating rooms are being standardized, and a planned rotation policy has been established to familiarize each nurse with all types of surgery. Though the number of operations performed was less than in 1948, the number of "super major" operations was greater.

During 1949, the Dietary Department served 365,482 patient meals and 325,079 employee meals. Several steps have been taken toward the department's long range goal of unification of services. The keeping of payrolls has become centralized, and to unify the therapeutic service, a Diet Manual is in the process of being written. Food trucks and other necessary new equipment purchased during the year will be adaptable to the new building. As is our custom, Thanksgiving and Christmas dinner invitations were extended to all employees.

The 1949 performance of the Maintenance Department is highlighted by a record of efficiency which realized a net saving of $12,000. In addition to its routine work, the Department:

Installed new equipment in the Laundry.
Constructed a classroom in the Solarium of Harris Hall.
Built an isolation section for tuberculosis work on the 4th floor of the Deaconess Building.
Constructed a beauty shop next to the Apothecary.
Remodeled completely the house purchased this year.
Repainted exteriors of most of the hospital buildings.

Largely because of shorter bed time for patients, the Laundry Department saw 1949 bring an increase in the amount of laundry received. However, a larger dry tumbler was installed and new methods were inaugurated which resulted in better service and fewer losses. One central sewing room was also established, with resulting economies of operation.

Greeting Cards

The Housekeeping Department took over the work of extermination formerly performed by outside concerns, and a new method of cleaning floors, based on the use of detergents, proved more efficient.

The Out-Patient Department was exceedingly busy during the last year. Efficiently conducted by Miss Philips, the work of the Palmer Cancer and Tumor Clinics represents an invaluable service to the community. Thirty-one cases showing some non-tubercular lung condition were referred to us by the Boston Chest X-Ray Program. Eight of these were subsequently admitted for treatment. The Cancer Detection Clinic examined a total of 469 well people, and is again indebted to the Harvard School of Public Health and to the Department of Public Health for defraying expenses unable to be borne by the patients. The Tumor Clinic reported 536 new patients and 622 "repeats". Total services were 3,754 cases, of which one-third were given free services and 198 were subsequently admitted upon recommendation of doctors.

For the Purchasing Department, the year 1949 presented fewer real problems of supply than any since the war. A total of 4464 requisitions were filled out from inventory, a large number of these for as many as 18 to 20 items. Special orders totaled 2989, and purchases of special items and supplies for inventory amounted to $167,629.64.

That the Social Service Department had another successful year is borne out by its record of services rendered to 590 new patients and 420 "repeat" patients. Minor services were rendered to almost 1500 others. It is the task of this department to stabilize the mental unbalance that so often accompanies illness. There is no work more important to the poor in money or the poor in spirit. Unless the social situation can be evaluated and treated, much of the benefit of medical care may be lost. This is where we carry on, and I think very well, the work of the founders of the Hospital. Typical of the patient's response to this fine work is a letter received in January which reads in part:

> "While I have been a patient in hospitals where the rooms are fancier, and the buildings much newer, I shall always recall yours as the one in which the patient receives the most excellent care and attention."

The Volunteer Service throughout 1949 has continued its work much as before. Regular Volunteers, Nurse's Aides, Gray Ladies, and Deaconess Aides have supplied volunteer help as usual in the Blood Bank, Out-Patient Clinic, Library, Operating Room, and Wards. This year we have also had volunteers working in the Cancer Detection Clinic, the mail desk, and doing secretarial work for the Record Room and the Dietary Department.

The Diversional Therapy work has proven exceedingly popular with the patients, but we have often had too few volunteers to keep up with the demand for this service. We supplied 292 patients with a total of 416 articles. The response from patients and doctors has been very gratifying.

Besides the Friends of the Deaconess Wednesday morning group and the five church groups — All Saints and Leyden Churches in Brookline, The Old South Church in Boston, Wellesley Hills Congregational Church, St. John's Methodist Episcopal Church in Watertown — which have worked so diligently year after year and are still keeping us well supplied with surgical dressings, we have added a new church group, St. John's Methodist Episcopal Church in Dedham.

Volunteers continue to work at home knitting eye bandages, threading needles, making powder packs and bronchoscopy sponges.

If asked what could be considered most outstanding in the Department this year, I would say that it is the quality of service and the faithfulness and constancy of the individual volunteers, who take an increasingly serious attitude toward their work. A convincing illustration of this service is Mrs. Alexander Grant, mother of six children, who has four grandchildren, runs a large home and is on half a dozen committees in Boston. An extremely active worker, she has given an average of four hours a day, three times a week, fifty-one out of the fifty-two weeks of 1949. She typifies the spirit of these women who give so generously and wholeheartedly of themselves, asking nothing in return save the knowledge that they are helping where help is needed. We owe them an enormous debt of gratitude.

Harriet Cook

Report of Service

Patients in hospital, January 1st, 1949		259
Patients admitted 1949		8,249
Medical	2,873	
Surgical	5,376	
Private	1,403	
Semi-private	2,827	
Ward	4,019	
Patients discharged 1949		8,299
Medical	2,724	
Surgical	5,575	
Private	1,477	
Semi-private	2,818	
Ward	4,004	
Patients in hospital, December 31, 1949		209
Deaths		216
Hospital mortality percentage		2.6%
Autopsy percentage		61.1%
Occupancy percentage		89.6%
Total patient days' service		98,143
Medical	26,529	
Surgical	71,614	
Private	16,207	
Semi-private	31,187	
Ward	50,749	
Full paying	63,158	
Part paying and free	34,985	
Average daily census		268.9
Largest number treated in one day		301
Smallest number treated in one day		176
Average days stay in hospital		11.8
Private	11.0	
Semi-private and ward	12.0	

Operations		5,811
Major	3,753	
Minor	2,058	
Average number of operations per month		484
X-Rays		19,511
Diagnostic	15,547	
Therapy treatments	3,964	
Laboratory tests		222,912
Autopsies	217	
Bacteriological examinations	5,340	
Basal metabolisms	979	
Chemical examinations	154,778	
Electrocardiograms	2,205	
Solutions	36,965	
Surgical examinations	7,871	
Transfusions	7,195	
Plasma	16	
Donors	7,346	
Other special services		
Dental X-Rays		240
Dental treatments and prophylaxis		153
Dental consultations and examinations		2,784
Dental extractions		156
Foot room		5,401
Hospital consultations		3,072
Out-Door		16,449
Clinic	3,754	
Dental	917	
Foot Room	86	
Laboratories	4,497	
Operating Rooms	344	
X-Ray	6,851	

Financial Statement

WE HAD current assets available for use without any restrictions as follows:

Cash	27,220.63
Accounts receivable less reserve for uncollectible accounts	61,612.05
Inventories of supplies	101,976.55
Insurance prepaid	6,457.02
	197,266.25
OUR LIABILITIES to be met from the above assets consisted of accounts payable and accrued expenses	59,388.63
THE DIFFERENCE was the balance of our general fund, December 31, 1949	137,877.62

WE HAD at December 31, 1949, unexpended balances of gifts and bequests for special purposes, a reserve for depreciation, obsolescence and construction and endowment building and equipment funds which are listed below with the kind of assets which represent them.

Unexpended balances of gifts and bequests for special purposes *Represented by cash and investments.*	158,945.87
Reserve for depreciation, obsolescence and construction *Represented by cash and investments.*	117,958.88
Reserve for Alterations *Represented by cash.*	73,700.00
Endowment funds and annuity reserve *Represented by cash and investments.*	1,085,079.20
New Building Fund *Represented by cash and investments.*	889,220.14
Land, Buildings and Equipment Fund *Represented by land, buildings and equipment, including Radium.*	2,466,763.22

	1949	1948
WE EARNED by caring for and furnishing medicines and supplies to patients	2,261,350.89	2,077,907.22
But we gave FREE TREATMENT of	133,997.25	188,108.74
And experience has taught us to make provision for UNCOLLECTIBLE ACCOUNTS to the amount of	55,751.76	37,401.23
So that our NET HOSPITAL INCOME was	2,071,601.88	1,852,397.25
THE DIRECT COST of providing care and supplies for patients including administration	2,019,885.19	1,915,142.32
Resulting in a SURPLUS OR DEFICIT FROM OPERATIONS of *This surplus is unusual because Blue Cross returned to the Hospital in 1949 a large amount which had been withheld over previous years.*	51,716.69	(deficit) 62,745.07
But we had OTHER INCOME as follows:		
Income from funds	80,553.19	69,209.81
Donations	16,638.59	15,975.20
Income earned on bequests during administration of estates	2,669.91	820.26
	151,578.38	23,260.20
Then we made provision for DEPRECIATION, OBSOLESCENCE AND CONSTRUCTION of	75,000.00	23,260.20
Provision for ALTERATIONS AND IMPROVEMENTS	73,700.00	
Which left a FINAL SURPLUS of	2,878.38	
This was transferred to the General Fund, an analysis of which for 1949 follows.		

Income and Expense

Income

(in CENTS *per* DOLLAR *of Income)*

was provided by —

	1949	1948	1944
Income from patients	95.1¢	95.8¢	94.7¢
Restricted income	2.2¢	2.1¢	1.4¢
Unrestricted income	1.7¢	1.1¢	1.1¢
Other donations	1.0¢	1.0¢	1.9¢
Community fund			.9¢
	$1.00	$1.00	$1.00

Expense

(in CENTS *per* DOLLAR *of Expense)*

provided for —

	1949	1948	1944
Professional care of patients	51.3¢	46.4¢	35.9¢
Dietary	8.2¢	20.4¢	26.6¢
Administrative and general	6.7¢	8.6¢	7.2¢
Housekeeping	5.9¢	6.9¢	6.6¢
Operation of plant	3.7¢	4.6¢	5.8¢
Free treatment	8.9¢	4.6¢	5.8¢
Maintenance and repair	3.1¢	3.4¢	3.8¢
Laundry and linen	2.7¢	2.6¢	3.8¢
Reserve for Extraordinary Maintenance	3.4¢		
Provision for Depreciation	3.5¢		
Other expenses	2.6¢	2.5¢	4.5¢
	$1.00	$1.00	$1.00

In the last year, we spent $135,000 more for the professional care of patients.

Analysis of General Fund

BALANCE ON JANUARY 1, 1949 was	158,660.19
THE GENERAL FUND was increased by:	
Unrestricted legacies	18,613.85
Surplus for year	2,878.38
	180,152.42
IT WAS REDUCED BY:	
Transfer to New Building Fund	42,274.80
LEAVING A BALANCE ON DECEMBER 31, 1949 of	137,877.62

Medical Staff

ADMINISTRATIVE STAFF

Howard F. Root, M.D. *Chairman*
Shields Warren, M.D. *Secretary*
F. Gorham Brigham, M.D.
Richard B. Cattell, M.D.
Alexander Marble, M.D.
Joseph H. Marks, M.D.
Leland S. McKittrick, M.D.

Deaconess Division

Surgeons

Richard B. Cattell, M. D., Surgeon-in-Chief
Hollis L. Albright, M. D.
Bentley P. Colcock, M. D.
Frank H. Lahey, M. D.
Charles A. Lamb, M. D.
Halsey Beach Loder, M. D.
Charles C. Lund, M. D.
Samuel F. Marshall, M. D.
Leland S. McKittrick, M. D.
Joe Vincent Meigs, M. D.
Theodore C. Pratt, M. D.
Fred A. Simmons, M. D.
Neil W. Swinton, M. D.
Irving J. Walker, M. D.
Kenneth W. Warren, M. D.
Paul A. Younge, M. D.

Physicians

Howard F. Root, M. D., Physician-in-Chief
Frank N. Allan, M. D.
Theodore L. Badger, M. D.
C. Cabell Bailey, M. D.
Elmer C. Bartels, M. D.
George O. Bell, M. D.
Allen G. Brailey, M. D.
F. Gorham Brigham, M. D.
Robert W. Buck, M. D.
Walter S. Burrage, M. D.
John W. Cass, Jr., M. D.
Arthur A. Cushing, M. D.
Donat P. Cyr, M. D.
James A. Evans, M. D.
Frank P. Foster, M. D.
Hugh P. Greeley, M. D.
Albert A. Hornor, M. D.
Lyman H. Hoyt, M. D.
Lewis W. Hurxthal, M. D.
Harriet D. James, M. D.
Stewart H. Jones, M. D.
Sara M. Jordan, M. D.
Allen P. Joslin, M. D.
Elliott P. Joslin, M. D.
Lewis W. Kane, M. D.
Everett D. Keifer, M. D.
Donald S. King, M. D.
Roger I. Lee, M. D.
James S. Mansfield, M. D.
Alexander Marble, M. D.
F. William Marlow, Jr., M. D.
Francis E. McDonough, M. D.
Rosemary Murphy, M. D.
H. Archibald Nissen, M. D.
John W. Norcross, M. D.

W. Richard Ohler, M. D.
A. Seymour Parker, Jr., M. D.
Leroy E. Parkins, M. D.
Carey M. Peters, M. D.
John R. Ross, M. D.
David I. Rutledge, M. D.
Dwight L. Siscoe, M. D.
Frances H. Smith, M. D.
Carlton R. Souders, M. D.
Richard P. Stetson, M. D.
William B. Stevens, M. D.
James H. Townsend, M. D.
Martin L. Tracey, M. D.
Conrad Wesselhoeft, M. D.
Priscilla White, M. D.
S. Allen Wilkinson, M. D.

Anesthetists

Urban H. Eversole, M. D.
Leo V. Hand, M. D.
Morris J. Nicholson, M. D.
Robert Orr, M. D.
Edwin R. Ruzicka, M. D.

Bacteriologist

Harold B. Kenton, Ph. D.

Cardiologist

Burton E. Hamilton, M. D.

Dermatologists

C. Marshall Crawford, M. D.
John L. Fromer, M. D.
C. Guy Lane, M. D.
Ethel M. Rockwood, M. D.

Gynecologists

Henry T. Hutchins, M. D.
Frank A. Pemberton, M. D.

Laryngologists

Carl H. Ernlund, M. D.
John R. Frazee, M. D.
Walter B. Hoover, M. D.
Frank D. Lathrop, M. D.
Lyman Richards, M. D.
Harold G. Tobey, M. D.
Francis L. Weille, M. D.

Neurologists

James B. Ayer, M. D.
G. Colket Caner, M. D.
John B. Dynes, M. D.
Oscar J. Raeder, M. D.
Walter I. Tucker, M. D.

Neurosurgeons

Gilbert Horrax, M. D.
James L. Poppen, M. D.

Ophthalmologists

William P. Beetham, M. D.
Louisa Paine Tingley, M. D.
J. Herbert Waite, M. D.

Oral Surgeons

Varaztad H. Kazanjian, M. D., D. M. D.
Harold A. Kent, D. M. D.
Leroy M. S. Miner, M. D., D. M. D.

Orthopedists

George Guy Bailey, M. D.
Albert H. Brewster, M. D.
Gilbert E. Haggart, M. D.
Robert H. Morris, M. D.
William A. Rogers, M. D.
Frank L. Shipp, M. D.
James W. Toumey, M. D.
George W. Van Gorder, M. D.

Pathologists

Shields Warren, M. D.
Olive Gates, M. D.
Samuel P. Hicks, M. D.
William A. Meissner, M. D.

Pediatrician

Warren R. Sisson, M. D.

Roentgenologists

Joseph H. Marks, M. D.
Isabel K. Bogan, M. D.
Hugh F. Hare, M. D.
Mirle A. Kellett, M. D.
Magnus I. Smedal, M. D.

Thoracic and General Surgeons

Herbert D. Adams, M. D.
David P. Boyd, M. D.
Richard H. Overholt, M. D.
John W. Strieder, M. D.
Richard H. Sweet, M. D.
Norman J. Wilson, M. D.
Francis M. Woods, M. D.

Urologists

Weston T. Buddington, M. D.
Fletcher H. Colby, M. D.
Harvard H. Crabtree, M. D.
Vernon S. Dick, M. D.
Earl E. Ewert, M. D.
Roger C. Graves, M. D.
Sylvester Kelley, M. D.
George Gilbert Smith, M. D.

Chiropodist

J. F. Kelly, B. S. C.

Palmer Memorial Division

Visiting Staff

Leland S. McKittrick, M. D.	*Surgeon-in-Chief*
F. Gorham Brigham, M. D.	*Physician-in-Chief*
Carl H. Ernlund, M. D.	*Laryngologist*
Joseph H. Marks, M. D.	*Roentgenologist*
Joe Vincent Meigs, M. D.	*Gynecologist*
George Gilbert Smith, M. D.	*Urologist*
Shields Warren, M. D.	*Pathologist*

Surgeons

Weston T. Buddington, M. D.	
Clifford C. Franseen, M. D.	
Gerald G. Garcelon, M. D.	
Francis Ingersoll, M. D.	
Wyland Leadbetter, M. D.	*Urologist*
John B. McKittrick, M. D.	
Carroll C. Miller, M. D.	
Langdon Parsons, M. D.	
Richard H. Sweet, M. D.	

Physicians

Robert E. Brownlee, M. D.	
Samuel P. Hicks, M. D.	*Pathologist*
Francis T. Hunter, M. D.	
Mirle A. Kellett, M. D.	*Roentgenologist*
L. Tillman McDaniel, M. D.	
William A. Meissner, M. D.	*Pathologist*
Carey M. Peters, M. D.	
James L. Tullis, M. D.	

Consultants

Elliott P. Joslin, M. D.	*Honorary Consulting Physician*
Joseph C. Aub, M. D.	*Medicine*
Francis Audin, M. D.	*Anesthesia*
James B. Ayer, M. D.	*Neurology*
Henry K. U. Beecher, M. D.	*Anesthesia*
Edward B. Benedict, M. D.	*Endoscopy*
Olive Gates, M. D.	*Pathology*
Burton E. Hamilton, M. D.	*Cardiology*
Leo V. Hand, M. D.	*Anesthesia*
John S. Hodgson, M. D.	*Neurological Surgery*
Henry Jackson, Jr., M. D.	*Medicine*
Varaztad H. Kazanjian, M. D., D. M. D.	*Oral Surgery*
Harold B. Kenton, Ph. D.	*Bacteriology*
George R. Minot, M. D.	*Hematology*
W. Jason Mixter, M. D.	*Neurological Surgery*
Richard H. Norton, Jr., D. M. D.	*Oral Surgery*
Frank A. Pemberton, M. D.	*Gynecology*
Ethel M. Rockwood, M. D.	*Dermatology*
William A. Rogers, M. D.	*Orthopedic Surgery*
Leroy A. Schall, M. D.	*Laryngology*
Channing C. Simmons, M. D.	*Surgery*
Louisa Paine Tingley, M. D.	*Ophthalmology*
Henry R. Viets, M. D.	*Neurology*
J. Herbert Waite, M. D.	*Ophthalmology*

Associate Staff

Hollis L. Albright, M. D.
Thomas J. Anglem, M. D.
Isabel K. Bogan, M. D.
Bradford Cannon, M. D.
John W. Cass, Jr., M. D.
Earle M. Chapman, M. D.
Fletcher H. Colby, M. D.
Ernest M. Daland, M. D.
Roger C. Graves, M. D.
Ward I. Gregg, M. D.
E. Parker Hayden, M. D.
Albert A. Hornor, M. D.
Lyman H. Hoyt, M. D.
Lewis W. Kane, M. D.
Harold A. Kent, D. M. D.
Frank H. Lahey, M. D.
Charles C. Lund, M. D.
Francis D. Moore, M. D.
Robert H. Morris, M. D.
H. Archibald Nissen, M. D.
Richard H. Overholt, M. D.
Leroy E. Parkins, M. D.
Theodore C. Pratt, M. D.
Howard F. Root, M. D.
Dwight L. Siscoe, M. D.
John W. Spellman, M. D.
Richard P. Stetson, M. D.
William B. Stevens, M. D.
Charles L. Swan, M. D.
Grantley W. Taylor, M. D.
George W. Van Gorder, M. D.
Irving J. Walker, M. D.

REPORT OF
Physician-in-Chief

This is an appropriate time to review briefly the development of the New England Deaconess Hospital during the first half of the Twentieth Century. It happens that the history of the hospital can be divided into two periods, both of which are significant to the new era in the hospital's history which is soon to be inaugurated.

Period of Development

In February, 1896, the five-story Home Hospital of the New England Deaconess Association was dedicated on Massachusetts Avenue, Boston. It soon attracted some of the most able and forward-looking physicians and surgeons of the time. The personalized character of its professional treatment, both medical and surgical, aided by the devoted service of those responsible for nursing and administration, resulted in a rapid increase in the number of patients. By 1907, a fifty-bed hospital had been erected on Pilgrim Road. The physicians and surgeons who sent patients to this hospital proved to be men interested in securing for their patients the highest type of medical care. Laboratory provisions by which investigative work and intensive diagnostic study of patients could be carried out were made early in its course. During this time, the program of the School of Nursing had become a three-year course, and Harris Hall had been built for its accommodation. In 1923, an additional wing providing for 130 new beds was built. At the same time, an organization of the medical and surgical staff was carried out in conformity with the best standards of American hospital organization. This organization of the staff was accomplished with the appointment of Dr. Elliott P. Joslin and Dr. F. G. Brigham as Physicians-in-Chief, Dr. Daniel F. Jones and Dr. Frank H. Lahey as Surgeons-in-Chief, Drs. L. S.

Class of 1898. The first graduates of the School of Nursing

Period of Consolidation

McKittrick and Howard M. Clute as Assistant Surgeons, and Drs. Burton E. Hamilton and Howard F. Root as Assistant Physicians.

From 1923 to the present, the development of new departments and the consolidation of the hospital as a whole has established it as an institution with both national and international standing. The new Palmer building, with provision for pathological laboratories under the full-time direction of Dr. Shields Warren, and the Cancer Clinic were milestones. The award of a charter to the New England Deaconess Hospital as an independent hospital marked another change. The addition of the George F. Baker clinic provided for wards and private rooms with the most modern equipment, as well as additional space for laboratories, medical research and classroom teaching. During this time, tremendous advances in chemistry, physiology, medicine and surgery led to the development of this hospital's highly specialized services, notably thyroid surgery, surgery of the chest, treatment of malignant disease and treatment of diabetes mellitus.

The hospital received invaluable aid from devoted volunteers. The Friends of the Deaconess, an organization of women formed to aid the hospital, provided many hospital needs. During the war, they and the Gray Ladies gave unstintingly of time and strength in the hospital wards.

The Future

Being considered today are proposals for alteration in the methods of administering medical care; and particularly, in the proportion of medical and surgical care as administered under private auspices or voluntary hospitals with private physicians as against those services as administered under the control of public and federal agencies. The pressing and continuing need for additional beds and improved hospital equipment has been urgently felt for several years. Indications are that such agencies as Blue Cross and Blue Shield tend to increase the public's demand for the personalized care of individual physicians and surgeons. The interest of the public in the support of institutions which provide for medical education, and particularly for properly directed research, is more and more evident. Therefore, as the plans for the new Deaconess Hospital develop, large increases in facilities for cancer investigation and for clinical investigation of metabolic disease, as well as opportunities for widening our educational program, appear certain.

During 1949, the daily occupancy of the hospital beds continued to be high, and the demand for beds increased. New methods of treatment and the increasing use of laboratory and research facilities tended to shorten the period of hospital stay for each patient. The result was that 8,249 patients entered the hospital as against 7,700 patients in 1948. The proportion of medical and surgical admissions has altered somewhat. In 1949, medical cases admitted numbered 2,873 and surgical cases numbered 5,376. The number of deaths totaled 238 in 1948, and 216 in 1949, with a decline in mortality percentage from 3.1 to 2.6 per cent. The medical staff of the hospital was not enlarged, but plans for reorganizing the medical staff provide for a more unified staff, affording increased opportunities and responsibilities for many physicians of the staff. The undergraduate teaching of students from Harvard Medical School and Tufts Medical School was continued. The post-graduate teaching of courses for both Harvard

and Tufts has been carried out through voluntary informal courses and by a special one-week graduate course. The large number of post-graduate physicians who come from all parts of the world includes both physicians and surgeons.

Investigation of chemical and metabolic problems in the field of diabetes, especially in relation to the problem of pregnancy in diabetic women, has been continued.

The monthly meetings of the staff have become occasions for the presentation of scientific papers dealing with new methods of diagnosis and treatment, as well as for the reporting of cases. Attendance has so increased that the meetings were transferred from the Baker classroom to the Harris Hall lecture room. Publications in scientific journals and addresses before scientific meetings attest to the professional activity and leadership of many staff members.

The Library on the sixth floor of the Baker building is constantly in use by staff members, their associates, and medical visitors and fellowship holders, including many from foreign countries. Four new surgical journals have been added this year, making a total of 22 journals regularly received. Sixteen hundred volumes are on the shelves. Although limited by space to more or less current publications, the library is growing in usefulness.

The medical staff expresses its profound appreciation to the School of Nursing and its Principal for the high quality of service now provided.

REPORT OF
Surgeon-in-Chief

This has been an eventful year for the New England Deaconess Hospital, one in which all concerned have been planning its further development simultaneously with the development of its new building program. A closer relationship of the Professional Staff with the Administrative Services and the Trustees has resulted. This is essential to the fine type of medical service which we all wish to provide at the New England Deaconess Hospital.

The surgical work of the hospital during the past year was carried out under the same physical handicaps that have been present for a number of years, and the Staff is eagerly looking forward to the new consolidated operating room facilities that the new building will provide. The first step in a more efficient Surgical Department was mentioned in my report last year, when both the Deaconess and Palmer operating room suites were placed under one supervising head, so that materials and methods could be standardized for better conduct of operations and for more efficient training of student nurses. Because of limited space, it has been necessary to shift scheduled operations from one suite to another, which has been quite a handicap to the Surgical Staff. With the planned increase in the number of operating rooms, the Professional Staff can work much more efficiently.

The hospital has been generous during the past year in providing additional operating room supervisors and in holding them even during the months when the volume of surgical work dropped. The Staff wishes to acknowledge the help provided by the Administration and the Nursing Staff. The continued booking of surgical cases throughout the day for both morning and afternoon schedules was of the greatest help in carrying out the surgical work.

A recent development in the postoperative management of surgical cases is the "recovery room", where all major surgical cases are sent immediately after operation. Cases remain in the recovery room for varying periods of time: eight, twelve, twenty-

four or even forty-eight hours, as individual needs indicate. Nurses specially trained for this work are available for supervision during this immediate postoperative period, and a limited staff can look after a large number of patients. It is during this immediate recovery period that serious complications most frequently occur and can best be prevented. It seems likely that a recovery room can be maintained without appreciable additional cost, since less nursing care is required after return to ward or room.

The Committee on Operating Room Procedures has been of definite help in a consulting and advisory capacity in the standardization of various procedures in the operating room.

In this day of increasing hospital costs, it is fortunate that one of the important developments in surgical care has been early ambulation, followed by earlier discharge from the hospital. Even with the more serious major cases, it is not unusual for a patient operated upon for a serious malignancy to leave the hospital in less than two weeks. In light of the short stay in the hospital, the total cost is probably not much greater than it was ten years ago.

SURGICAL OPERATIONS FOR 1949

	Deaconess	Palmer	Total
MAJOR	2361	1385	3746
MINOR	1528	864	2392
	3889	2249	6138

More than six thousand operative procedures were carried out, and more than sixty per cent were major procedures. In the Deaconess suite, approximately the same number of operations was performed this year as in 1948.

The surgical work done was of the type for which the New England Deaconess Hospital is well recognized: Neurosurgical conditions, including brain tumers, intracranial aneurysms, and conditions of the spinal cord and sympathetic nervous system; patients with malignancy including the stomach, colon and rectum; patients with diseases of the chest including the heart and lungs; patients with complications associated with diabetes demanding surgery; and patients with thyroid disease. Experiences of the Professional Staff with these various serious conditions have contributed to the better care of patients throughout the world.

The educational activities participated in by the Professional Staff can be briefly listed under five headings:

A limited number of medical students are assigned to the Deaconess Hospital as part of their clinical training.

An affiliated general surgical residency has been developed. In addition, there is an extensive fellowship program in the various specialties.

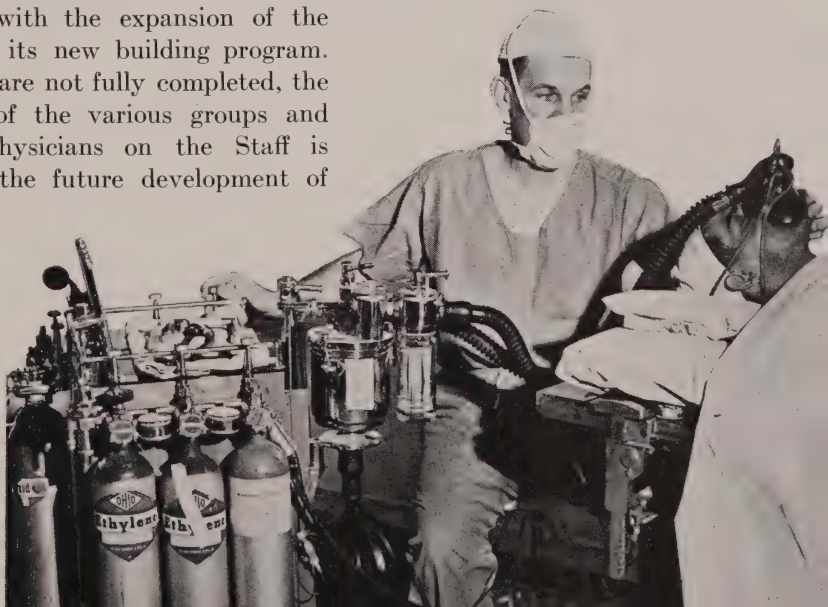
Further training is provided through the appointment of Assistants to the Professional Staff.

Visitors from throughout the world are in daily attendance at the clinical exercises and in the operating rooms.

Many members of the Staff participate in teaching, and in presenting the work of the Hospital at medical meetings throughout the world. Furthermore, the experience of the hospital becomes available to the profession at large by means of published medical articles and books.

The Professional Staff participated in numerous educational activities in the past, and will continue to do so. It should be realized, however, that because the New England Deaconess Hospital is a private institution, it cannot provide the educational opportunities for interns and residents that can be provided by general hospitals with a large ward service. For this reason, in the future planning of the hospital, the present program cannot be appreciably expanded.

A plan for reorganization of the Staff seems an important step in conjunction with the expansion of the hospital and its new building program. While plans are not fully completed, the cooperation of the various groups and individual physicians on the Staff is essential to the future development of the hospital.



REPORT OF *Pathologist*

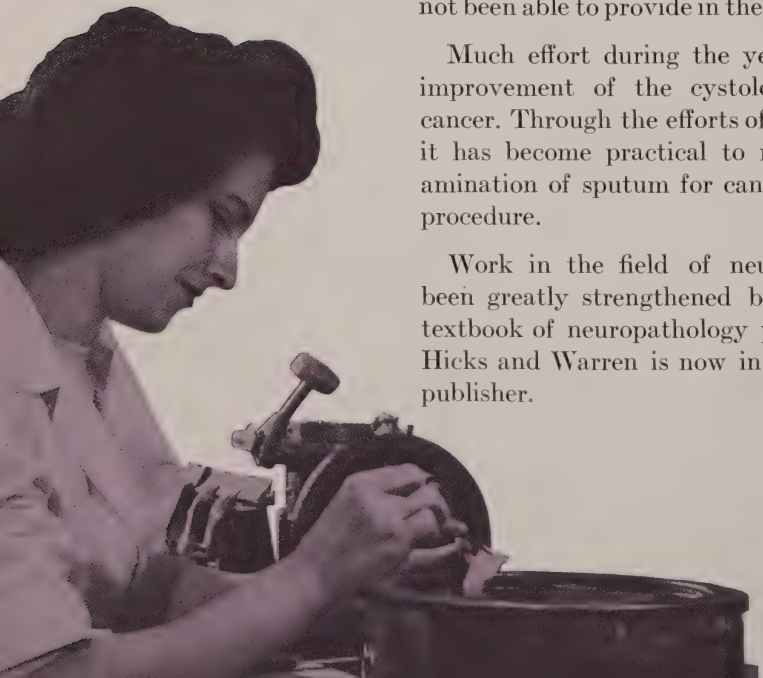
Almost every phase of the laboratories' activities has shown a moderate increase over the preceding year. Only the autopsies and the surgical specimens have shown a slight decrease.

We have been able to maintain morale in our present makeshift and very badly crowded quarters. The planned expansion into the basement and remaining portion of the first floor of Palmer will compensate somewhat for the impending loss of the laboratories on the second floor of the George F. Baker Clinic. With the increasing load, they will hardly do more than that.

An important feature has been the development of plans for the new Cancer Research Institute to be built on the lot on Pilgrim Road adjacent to Harris Hall. An additional grant of $85,000 has been obtained for an addition to the Cancer Research building, which will house the Cancer Control Division of the Harvard School of Public Health and provide space for the Cancer Clinic now in the Palmer building. This addition will offer a number of advantages for efficient operation that we have not been able to provide in the present quarters.

Much effort during the year has gone into improvement of the cystologic diagnosis of cancer. Through the efforts of Miss Middleton, it has become practical to make routine examination of sputum for cancer cells a reliable procedure.

Work in the field of neuropathology has been greatly strengthened by Dr. Hicks. A textbook of neuropathology prepared by Drs. Hicks and Warren is now in the hands of the publisher.



The work of the Blood Bank has continued to develop under Dr. Kenton's guidance. Its total volume of 7,195 transfusions and 7,346 donors makes it one of the largest Blood Banks in the country.

In addition to the grants for research in the fields of radioactive isotopes and of cancer of the stomach, a special grant was made by the American Cancer Society, Massachusetts Division, Inc., for the purpose of evaluating the Huggin's Test for cancer. This test has now been carefully studied by Mrs. Gilligan and Miss Rothwell and has proved to be not sufficiently accurate for the diagnosis of cancer. It does, however, give important information about blood protein under certain abnormal conditions.

During the year the laboratory resident staff consisted of:

Dr. Bruce H. Smith
Dr. Carroll H. Smith, Jr.
Dr. Joshua L. Edwards
Dr. Robert W. Prichard

In addition to this staff, these volunteers spent a number of months in training:

Dr. Joseph N. Bonner
Dr. James Dealey
Dr. Kenneth L. Hardy
Dr. James M. Judd
Dr. Yong Liu
Dr. Preston Trousdale
Dr. Theodore Wilson

And, the following completed their appointments:

Dr. William Christensen
Dr. William L. Drake, Jr.
Dr. Robert H. Grugan
Dr. Bernard F. Mann, Jr.
Dr. Daniel M. Shapiro
Dr. Duncan C. Smyth

Dr. Bernard F. Mann, Jr., became visiting Professor of Pathology at the University of the Philippines; Dr. William L. Drake, Jr., became Resident in Pathology at the Presbyterian Hospital in Philadelphia.

For the first time, we have had this year a resident from Dr. Marks' department, in addition to a resident from the Radiology Department of the Peter Bent Brigham Hospital.

The 1949 statistical report of the laboratories is as follows:

BLOOD BANK

Transfusions	7,195
Donors	7,346
Plasma (units)	16

CHEMICAL LABORATORY

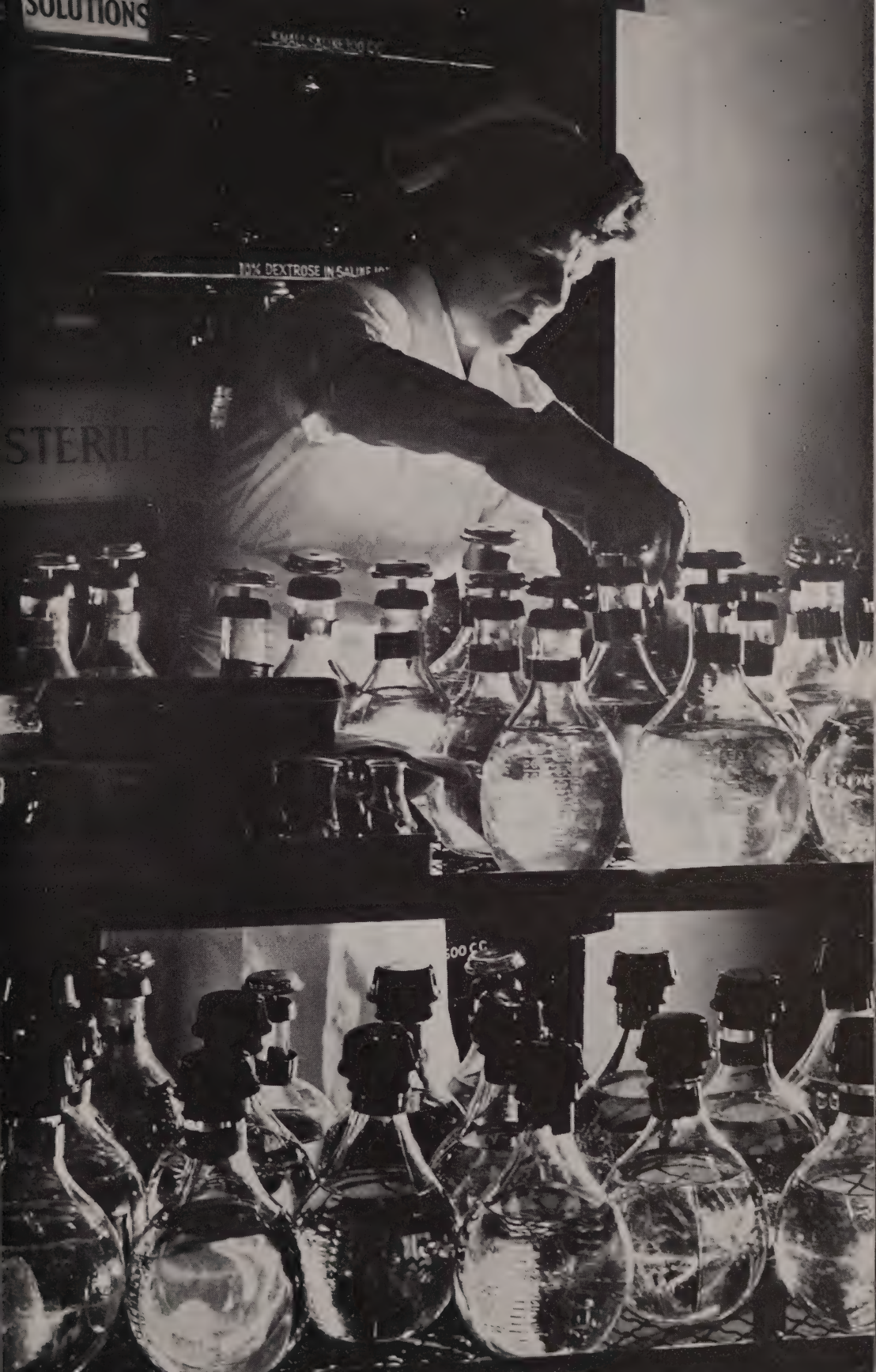
Basal Metabolism Tests	979
Electrocardiograms	2,205
Blood Examinations	89,336
Urine Examinations	52,396
Miscellaneous Examinations	13,046

PATHOLOGICAL LABORATORY

Autopsies	217
Bacteriological Examinations	5,340
Surgical Examinations	7,871

SOLUTION ROOM

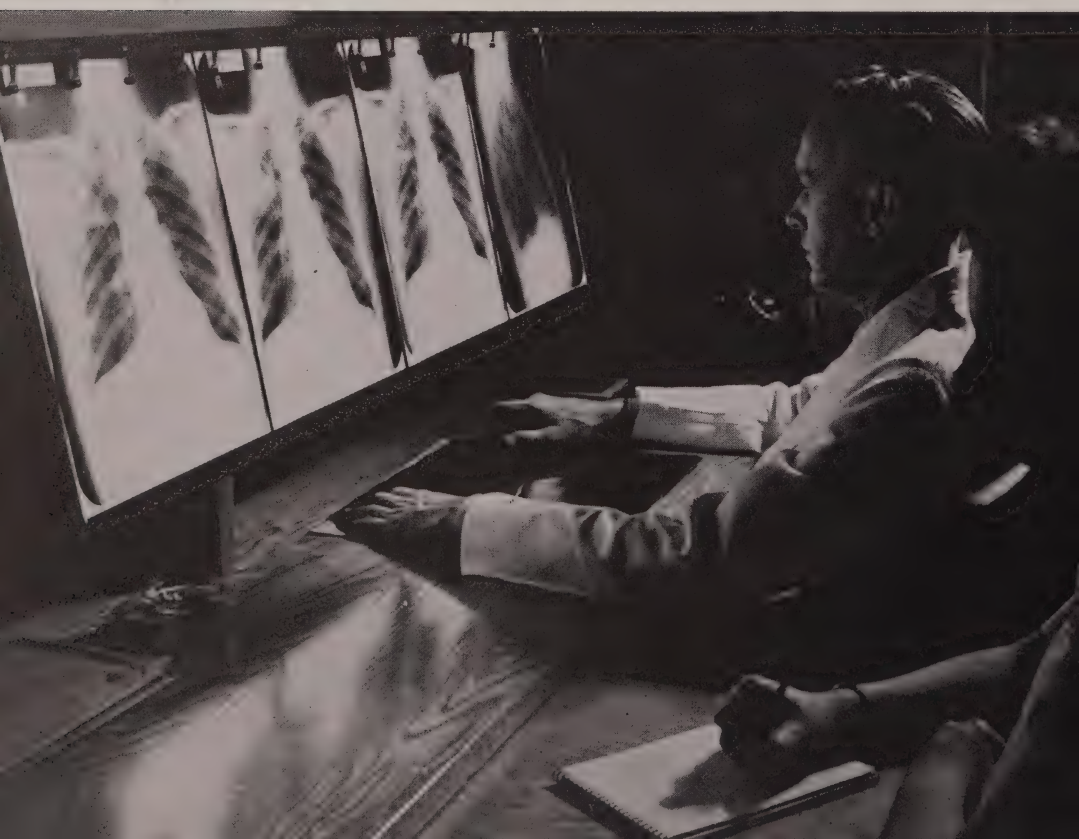
Total Solutions Given	62,804


SOLUTIONS
10% DEXTROSE IN SALINE
STERILE

REPORT OF
Roentgenologist

The major achievements in the Department of Roentgenology for 1949 are as follows: The total number of examinations done has again exceeded all previous records for the Department, the figure for the year being 15,547. The work done in the Department has taxed the available space and equipment in it for several years. It was, therefore, evident that additional space and equipment were necessary, and the decision to purchase a new machine was approved in October. The office in Deaconess has already been moved to the opposite side of the second floor lobby and the new machine will be in operation in the old office space about February first of next year.

The decision to have routine photo-roentgen examinations of the chest on all ambulatory patients was made in September and is now in operation. This examination is also made on all patients coming to the Cancer Detection Clinic and is judged a valuable though inexpensive public health measure.



REPORT OF
Friends of the Deaconess

During the year 1949, the Friends of the Deaconess have continued with their usual activities. A total of 262 Annual Members and six Life Members, the highest we have ever had, shows that we are still growing, however slowly. These memberships, often accompanied by donations, brought in a total of $1,147.

For the first time in our history, we have brought out this year a small booklet containing our membership list, the names of all officers and committee members, accounts of our money-raising activities and other interesting data. Miss Edith Wright, a committee of one, compiled the pamphlet and arranged for its printing at a modest price.

The Annual Pop Concert benefit on May 20 was most efficiently managed this year by Mrs. John B. McKittrick and yielded a net profit of over $1,000, including more than $100 from the sale of flowers. All of these were donated, having been solicited from florists by the Junior Friends, who made many of them into corsages. The concert was a particularly good one. Our soloist, Miss Tung Quong Quong, is an extraordinarily gifted young Chinese pianist and she received an enthusiastic ovation. Many of the Trustees and our Staff were there as well as the Graduating Class of the School of Nursing, who were guests of the Alumnae

Association. We are proud that our "Pop" has become a gala party for the Deaconess family.

At our annual meeting on October 26, Dr. Clifford C. Franseen spoke most interestingly on cancer detection, and we were also entertained by a charming young pianist, Miss Pamela Cook, the daughter of our Executive Director. All were amazed that anyone so young had been able to achieve such technical excellence. Dr. Cook also spoke, giving us the latest news about the new building. Miss Nelson, representing Miss Shrader, told us of the great Nursing Convention which she and Miss Shrader attended last July in Stockholm.

Other volunteer work included the making of surgical dressings on Wednesday mornings, and various jobs in the Library, the Blood Bank and on the Wards. Our Thrift Shop has continued under increasing difficulties owing to its inaccessibility, diminished stock, and the illness or absence of some of the Committee. A new source of revenue was derived from the four bridge parties, organized by Mrs. Sweet and her committee, netting us nearly $400. For 1950, it behooved us to find some other method of money-raising, and we are planning a theatre benefit for March 7th: a night at the Broadway success, "Mr. Roberts".

Again, we are holding our funds in order to make an appreciable gift to the new building. We have, however, made small gifts to the Social Service and Dietary Departments, and one of our members, Mrs. Carter, has given clothing greatly needed in the Children's Ward in Deaconess. We have also awarded our nursing scholarships, and last spring we were the guests of the School of Nursing at tea in Harris Hall, when we had the pleasure of meeting our scholars and their classmates. At the graduation in May, we were extremely proud to see two of our scholars, the first to complete the course since the scholarships were started, graduating at the top of their class. Both are now doing splendid work as Graduate Nurses in the Hospital. This seems to be a perfect fulfillment of the purpose of our award.

We were represented this September at the annual meeting of the A.H.A. Committee on Hospital Auxiliaries in Cleveland by Miss Pamela Whitney. She brought back an interesting account of all the discussions and seemed proud of the work of our auxiliary in comparison to that of others represented.

The Junior Friends of the Deaconess, organized over a year ago, now report a membership of twenty. In spite of the fact that they are all carrying full-time jobs, either in an office or at home with their own young children, these Junior Friends have continued to give long hours of work, mostly in the late afternoons or evenings, to their diversional therapy work and to other volunteer services. They always stand ready to help us in any project, and will, we hope, be present bearing flowers at the "Mr. Roberts" benefit!

This report would not be complete without a special tribute from the Friends to their beloved friend, Miss Sadie Hagen. She was a charter member of our group which sprung from the Women's Committee in the 1931–32 campaign for funds. Miss Hagen's enthusiasm for the cause of the Deaconess drew many of us into this campaign. In the eighteen years that followed, she was always a very active member, coming constantly to our Surgical Dressings meetings where every worker has delighted in knowing her. At the big rummage sales, she worked — too hard. When Mrs. Warren and her committee opened the Thrift Shop three years ago, Miss Hagen was an enthusiastic worker and was generally there one day a week up to within a month of her final illness. We marvel now in recollecting that she climbed those steep stairs twice a day when actually she must have been suffering. Miss Hagen's courage, her warm heart, and her deep devotion to the Deaconess Hospital will always remain with us and inspire us in our own work for the same great cause.

New Cancer Research Institute

—Now Under Construction

The Deaconess' Cancer Research Institute will be the first in New England to be devoted exclusively to the study of cancer and cancer detection work. It will be unique in this area in that it will not be a hospital building in the strict sense of the word, except for an out-patient cancer clinic such as is being conducted at present in the Palmer Memorial.

The primary use of the clinic is to assist the private practitioner in the diagnosis of cancer, and to develop and test the value of various types of examinations that the general practitioner may make in his own office. It is so essential to obtain an early diagnosis of cancer that anything we can do to facilitate this work is considered of paramount importance. The benefits of cancer research will thus be carried into the day-to-day field of medical practice with a resultant reduction in the present mortality rate.

The building will be three stories high and 138 feet long, with a 66 foot front on Pilgrim Road between Harris Hall and the Channing Home. Besides the extensive laboratory and clinic facilities, there will be an auditorium which will make it possible for our doctors to demonstrate their specialized knowledge to an even larger number of visiting doctors and Fellows than has been possible in the past.

Construction of the new building has been made possible through a grant by the U. S. Public Health Service amounting to $485,000, together with other contributions.

Endowment Funds

Income to be used for free beds

Mary V. Ackley Free Bed Fund	1936	$ 3,000.00
Anonymous	1941	16,000.00
Adelaide Bunnell Allen Fund	1942	1,000.00
Julia A. Babcock Free Bed Fund	1929	200.00
George William Boyd Free Bed Fund	1909	5,000.00
Abbie K. Chandler Free Bed Fund	1913	1,000.00
Georgette B. Coburn	1948	2,962.00
Mr. and Mrs. Costello C. Converse Free Bed Fund	1927	50,000.00
Fannie F. Eager Free Bed Fund	1908	5,000.00
George R. Eager Free Bed Fund	1921	5,000.00
Mr. and Mrs. William R. Elliott Free Bed Fund	1938	31,190.81
Free Bed for Eye Patients	1931	6,904.00
Edith W. Gallagher Fund	1933	10,000.00
Ferdinand C. Gammons Fund	1934	68,575.91
Nathan R. George Free Bed Fund	1943	29,197.38
Annie W. Gooding Free Bed Fund	1925	1,200.00
Isabella Louise Grant Free Bed Fund	1944	6,500.00
Lucy J. Haigh Free Bed Fund	1926	5,000.00
Bishop John W. Hamilton Free Bed Fund	1938	500.00
Mary Adeline Tobey Hastings Fund	1931	24,934.44
Elijah B. and Josephine M. Hine Room	1904	3,900.00
Abbie Hills Holbrook Bed Fund	1935	10,000.00
Ida Sinclair Holt Free Bed Fund	1927	25,000.00
Dr. Joshua C. Hubbard Free Bed Fund	1917	5,000.00
S. Elizabeth Huntington Free Bed Fund	1936	5,000.00
Soloman M. Hyams Free Bed Fund	1929	10,000.00
Linda May Jackson Free Bed Fund	1931	600.00
Deborah M. Josselyn Free Bed Fund	1917	346.40
Nellie Louise Kidder Free Bed Fund	1930	745.24
Kingsbury Fund for Aliens	1911	678.05
Aimee Lamb Free Bed Fund	1931	5,000.00
Effie E. Lord Free Bed Fund	1941	1,000.00
Flora E. MacGlauflin Free Bed Fund	1933	5,000.00

Mary L. McIntyre Fund	1942	$ 1,000.00
George H. Maxwell Fund	1927	10,000.00
Sarah K. Morse Fund	1928	1,758.00
Nellie S. Moulton Free Bed Fund	1931	300.00
New England Deaconess Alumnae Association Free Bed Fund	1931	10,200.00
New Hampshire Conference Free Bed Fund	1916	1,019.36
John A Ordway Fund	1942	5,000.00
Albert N. Parlin Free Bed Fund	1930	50,000.00
Abbie S. Peasley Free Service Fund	1917	475.00
Mary E. Pickering Free Bed Fund	1926	500.00
Anna M. Pickford Memorial Free Bed Fund	1927	25,000.00
Georgia M. Whidden Porter Free Bed Fund	1938	20,696.84
Howard M. Ray Memorial Fund	1937	300.00
Mrs. Hannah R. Richards Memorial Fund	1923	1,000.00
Mary Elizabeth Slack Free Bed Fund	1944	25,000.00
Emma A. Ward Fund	1941	1,896.23
Catherine E. Watson Free Bed Fund	1923	5,000.00
Sarah Wheeler Free Bed Fund	1948	4,000.00
Annie W. Woolson Free Bed Fund	1920	5,000.00

Income to be used for special purposes

Jane G. A. Carter Orthopedic Fund	1928	1,000.00
John Howard Charlton Fund	1942	1,000.00
Mary E. Holt Room Fund (Furnishings)	1911	1,000.00
Sylvester Kimball Fund (Furnishings)	1923	500.00
Gallah Levi Fund (Furnishings)	1914	1,000 00
Mary DeShon Lowell Fund	1928	598.50
Fannie Kimball Morse and May Conant Morse Fund	1923	1,000.00
Walter S. North Fund for Study and Care of Diabetes	1941	1,000.00
Wendell Phillips Parker Fund	1945	1,040.00
William L. Shearer Fund	1932	10,000.00
Louise O. Twombley Fund	1937	100.00
F. B. and G. A. Webster Fund	1923	8,898.01
William F. Willman Fund	1934	4,887.33

Income to be used for general purposes

Malon H. Bancroft Fund	1947	$ 1,740.51
Ada S. Blair Fund	1926	4,750.00
Elizabeth A. Botsford Fund	1946	10,000.00
John and Harriet Champhrey Fund	1923	3,063.36
Philip Chase Fund	1938	50.00
Clark Fund	1900	2,910.00
Chester C. Corbin Fund	1917	100,000.00
Clara L. Crawford Fund	1925	5,000.00
Bertrand V. Degan Fund	1947	3,000.00
Francis J. Douglas Fund	1926	500.00
Roswell L. Douglas Fund	1922	2,500.00
Inez E. Fisher Fund	1947	16,047.33
Mary George Fund	1915	1,000.00
Sarah R. Griffin Fund	1918	7,000.00
Francis W. Hale Fund	1935	1,000.00
Florence S. Haskins Fund	1949	5,000.00
Charles W. Haworth Fund	1936	300.00
Alice Hiscox Fund	1945	1,000.00
Margaret E. Johnston Fund	1926	2,500.00
Daniel Fiske Jones Memorial Fund	1938	5,000.00
George W. Lawrence Fund	1947	171,672.59
Maud G. Leadbetter Fund	1945	1,000.00
Edward E. Mallalieu Fund	1947	29,190.88
Willard Taylor Perrin and Lucy E. Perrin Memorial Fund	1939	13,010.97
Chaplain and Mrs. Charles A. Plumer Fund	1922	200.00
Herman and Emma Richter Fund	1929	2,301.46
Elizabeth Clarke Rogers Fund	1928	5,000.00
Sophie K. Rousmaniere Fund	1945	15,000.00
Andrew T. Sampson Fund	1949	2,408.40
Georgianna B. Sargeant Fund	1935	2,000.00
Smith-Hamilton Fund	1936	42,600.00
Ella Gertrude Spalding Fund	1934	2,114.87
Edward W. Swan Fund	1946	33,743.96
Sarah S. Swift Fund	1929	2,275.70
Alice Wheeler Fund	1939	8,553.19

An Invitation

The inspiration behind the more than half-century of distinguished leadership and influence for good of the New England Deaconess Hospital has been the instinct and desire to care for those who are not able to care for themselves. Today the need for medical care is greater than it has ever been. Will you accept this invitation to let skilled, friendly workers be the servants of your good will?

Form of Donation

New England Deaconess Hospital

Francis W. Capper, Treasurer

16 Deaconess Road, Boston 15

Enclosed find $..... as my contribution toward relieving the suffering of the poor.

Name.....

Address.....

.....

Make all checks payable to the New England Deaconess Hospital, Boston 15, Massachusetts

Form of Bequest

I give and bequeath the sum of

..... dollars to the New England Deaconess Hospital, a corporation duly organized under the laws of the Commonwealth of Massachusetts, to be used in such manner as may be considered most expedient by the Board of Trustees.

Name.....

Address..... .....

....

Date.....

"I never had a patient who left the hospital without being pleased with it, and without having felt the friendly and personal atmosphere in a most marked degree . . . I have never had a patient do better in any place, and I think not as well."

— *from a doctor's letter.*

Annual Report 1949

NEW ENGLAND DEACONESS HOSPITAL